# Florida Department of State

**Division of Corporations** Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)541-3694

Fax Number : (305)541-3770

#### LIMITED LIABILITY COMPANY

CAROGAR-109, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

1 of 2

6/6/00 12:31 PM



# ARTICLES OF ORGANIZATION OF CAROGAR-109, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

#### ARTICLE I -- NAME

The name of the limited liability company shall be CAROGAR-109, LLC ("Company").

#### ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the company shall be 12393-2 Pembroke Road, Pembroke Pines, FL 33025.

#### ARTICLE III - DURATION

Perpetual. The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall be perpetual, unless the company is earlier dissolved as provided in these Articles of Organization.

#### ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is

Ira L. Zuckerman 7771 W. Oakland Park Boulevard, Suite 215 Ft. Lauderdale, FL 33351

#### ARTICLE V -- CAPITAL CONTRIBUTIONS

Each member shall make capital contributions to the company as necessary from time to time, on the majority consent of all members.

#### ARTICLE VI - ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the company except with the majority written consent of the members of the company and on such terms and conditions as shall be determined by majority consent of the members. A member may transfer his or her interest in the company as set forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless a

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majority of the other members of the company approve of the proposed transfer by written consent.

#### ARTICLE VII -- TERMINATION OF EXISTENCE

The company shall be dissolved on the death, bankruptcy, or dissolution of a manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by the consent of a majority of the remaining members, provided there are at least two remaining members.

#### ARTICLE VIII -- MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial manager of the company is FABIAN T. GARCIA, whose address is 8A Camden Park, Singapore 299799.

of organization at	, on this <u>2nd</u> day of <u>June</u> , 2000.
	Organizer and Managing Member:
REPUBLIC OF SINGAPORE ) CITY OF SINGAPORE ) EMBASSY OF THE UNITED ) STATES OF AMERICA )	FABIAN T. CARCIA
87A98-QR	Allass
*COHPARTOR	FF & B
Sworn to and subscribed before me this <u>2nd</u> who is personally known to me, or produced as identification.	Venezuela passport  Venezu
	Commissioned Manne of Mosame Bublic
	(SEAL) 2 H00000030417

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

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SECRETARY OF STATE

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### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: <u>CAROGAR-109, LLC</u>
- 2. The name and address of the registered agent and office is:

Ira L. Zuckerman
(NAME)

7771 W. Oakland Park Boulevard, Suite 215
(P.O. BOX NOT ACCEPTABLE)

Ft. Lauderdale, FL 33351
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar/With and accept the obligations of my position as registered agent.

IRA L. ZUCKERMAN

6/5/00 DATE

Filing Fee: \$35 for Designation of Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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